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32425 7590 12/08/2010

FULBRIGHT & JAWORSKI L.L.P.
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 AUSTIN, TX 78701

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David D. Bahler

(Depositor's name)

(Signature)

February 15, 2011

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/576,636 03/12/2007 Christer Sinderby BRKP-021US 5708

TITLE OF INVENTION: COMBINED POSITIVE AND NEGATIVE PRESSURE ASSIST VENTILATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1510 \$300 \$0 \$1810 03/08/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
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OSTRUP, CLINTON T 3771 128-202130

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

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Fulbright & Jaworski LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Maquet Critical Care AB

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

SoIna, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

David D. Bahler

Date February 15, 2011

Typed or printed name

Registration No. 30,932

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